

(Annual Report Form Solid Waste Facilities)

**NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTECTION
ECONOMIC REGULATION & LICENSING UNIT
DISPOSAL UTILITIES FOR THE YEAR ENDED
DECEMBER 31, 2011**

ANNUAL REPORT OF SOLID WASTE NUMBER SW _____
PROGRAM INTEREST NO. (PI#) _____

NAME OF COMPANY _____

CURRENT STREET ADDRESS _____

CURRENT BILLING/ MAILING ADDRESS _____

CURRENT TELEPHONE NUMBER: CURRENT FAX NUMBER
_____/_____

CURRENT EMAIL ADDRESS _____

CURRENT PRESIDENT/OWNER OF COMPANY _____

CURRENT CONTACT PERSON _____

MAIL REPORT TO: NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTECTION
ECONOMIC REGULATION & LICENSING
401 EAST STATE STREET
MAIL CODE 401-02C
TRENTON, NEW JERSEY 08625

TELEPHONE: (609) 984-6746
FAX: (609) 777-1951

Identify officer, accountant or other person to whom any communication should be addressed concerning this report

Name: _____ Phone: _____

Address: _____
REQUIRED EVEN IF THERE WAS NO ACTIVITY DURING YEAR ENDING _____

REPORTS DUE NO LATER THAN JUNE 1, 2011
\$5 A DAY PENALTY FOR LATE REPORT

2011 ANNUAL REPORT INSTRUCTIONS

1. This Annual Report form contains the appropriate schedules for solid waste utilities who are required to file an Annual Report with the State of New Jersey, Department of Environmental Protection.
2. This report must be filed in Original Form no later than June 1, 2012
3. Failure to file a complete Annual Report will result in penalties and may result in the loss of your Certificate of Public Convenience and Necessity in accordance with N.J.A.C. 7:26H-5.15(b)1.
4. The word "Respondent" wherever used in this report means the person, firm, association, or corporation in whose behalf the report is filed.
5. This report can be found online at WWW.NJ.GOV/DEP/DSHW/SWR. The form can be downloaded on your hard drive and computer. It CANNOT be completed online as yet.
6. The instructions should be carefully observed and each question should be answered fully and accurately whether or not it has been answered in a previous Annual Report. If the word "No" or "None" truly and completely states the fact, it should be used to answer any particular inquiry or any portion thereof. If any schedule or inquiry is not applicable to the Respondent, please indicate by noting "N/A". Include a brief response explaining why the entry is not applicable.
7. The Annual Report should be complete in itself in all particulars. Reference to Annual Reports of previous years or to other reports should not be made in lieu of required entries except as herein specifically directed or authorized.
8. Entries of a contrary or opposite character (such as decreases reported in a column providing for both increases and decreases) should be enclosed in parentheses.
9. Wherever schedules call for comparisons of figures of a previous year, the figures reported must be based upon those shown by the Annual Report of the previous year. Any adjustment from a prior year's Annual Report must be explained in detail.
10. If the Respondent makes a report for a period less than a calendar year, the beginning and the end of the period covered must be clearly stated on the form cover and throughout the report where the year or period is required to be stated.

Questions regarding the completion of this report are to be directed to Roseann Fabrizio (609) 984-6746

SOLID WASTE DISPOSAL UTILITIES ARE REQUIRED TO NOTIFY THE DEPARTMENT OF ANY CHANGES IN TIPPING FEES WITHIN THREE (3) DAYS OF THE CHANGES. Please copy and use this form to notify the Department of any changes your facility may make in tipping fees.

Name of Company: _____

Solid Waste Number: _____

Old Tipping Fees & Waste Type: _____

New Tipping Fees & Waste Type: _____

Date New Tipping Fee was posted as the gate rate: _____

Each time your facility changes its tipping fee, please fill out the above information and send to:

NJDEP
ENVIRONMENTAL MAMAGEMENT
ECONOMIC REGULATIONS & LICENSING
401 EAST STATE ST
Mail Code 401-02C
TRENTON, NJ 08625

OR
Fax: (609)777-1951

Environmental Management

Economic Regulation & Licensing

401 East State St

Mail Code 401-02C

Trenton, NJ 06825

Telephone (609)984-6746 Fax (609-777-1951

HOST COMMUNITY BENEFIT REPORT
USE LATEST AVAILABLE DATA FOR HOST COMMUNITY BENEFITS

SOLID WASTE NUMBER: SW
COMPANY:

FACILITY ID:

FACILITY ADDRESS:

MAILING ADDRESS:

HOST MUNICIPALITY

AMOUNT PER TON

FREE DUMPING Y/N

CONTACT PERSON:

TELEPHONE :

EMAIL:

FAX:

DATE:

(g) Waste identification and definition of solids includes the following:

1. Solid wastes; waste ID number and definitions:

- i. 10 Municipal (household, commercial and institutional): Waste originating in the community consisting of household waste from private residences, commercial waste which originates in wholesale, retail or service establishments, such as, restaurants, stores, markets, theatres, hotels and warehouses, and institutional waste material originated in schools, hospitals, research institutions and public buildings.
- ii. 12 Dry sewage sludge: Sludge from a sewage treatment plant which has been digested and dewatered and does not require liquid handling equipment.
- iii. 13 Bulky waste: Large items of waste material, such as appliances and furniture. Discarded automobiles, trucks and trailers and large vehicle parts, and tires are included under this category.
- iv. 13C Construction and demolition waste: Waste building material and rubble resulting from construction, remodeling, repair, and demolition operations on houses, commercial buildings, pavements and other structures. The following materials may be found in construction and demolition waste: treated and untreated wood scrap; tree parts, tree stumps and brush; concrete, asphalt, bricks, blocks and other masonry; plaster and wallboard; roofing materials; corrugated cardboard and miscellaneous paper; ferrous and non-ferrous metal; non-asbestos building insulation; plastic scrap; dirt; carpets and padding; glass (window and door); and other miscellaneous materials; but shall not include other solid waste types.
- v. 23 Vegetative waste: Waste materials from farms, plant nurseries and greenhouses that are produced from the raising of plants. This waste includes such crop residues as plant stalks, hulls, leaves and tree wastes processed through a wood chipper. Also included are non-crop residues such as leaves, grass clippings, tree parts, shrubbery and garden wastes.
- vi. 25 Animal and food processing wastes: Processing waste materials generated in canneries, slaughterhouses, packing plants or similar industries, including animal manure when intended for disposal and not reuse. Also included are dead animals. Animal manure, when intended for reuse or composting, is to be managed in accordance with the criteria and standards developed by the Department of Agriculture as set forth at N.J.S.A. 4:9-38.
- vii. 27 Dry industrial waste: Waste materials resulting from manufacturing, industrial and research and development processes and operations, and which are not hazardous in accordance with the standards and procedures set forth at 7:26G. Also included are nonhazardous oil spill cleanup waste, dry nonhazardous pesticides, dry nonhazardous chemical waste, and residue from the operations of a scrap metal shredding facility.
- viii. 27A Waste material consisting of asbestos or asbestos containing waste.
- ix. 27I Waste material consisting of incinerator ash or ash containing waste.

(h) Waste identification and definition of liquids include the following:

1. Liquid wastes; waste ID number and definitions:

- i. 72 Bulk liquid and semi-liquids: Liquid or a mixture consisting of solid matter suspended in a liquid media which is contained within, or is discharged from, any one vessel, tank or other container which has the capacity of 20 gallons or more. Not included in this waste classification are septic tank clean-out wastes and liquid sewage sludge.
- ii. 73 Septic tank clean-out wastes: Pumpings from septic tanks and cesspools. Not included are wastes from a sewage treatment plant.
- iii. 74 Liquid sewage sludge: Liquid residue from a sewage treatment plant consisting of sewage solids combined with water and dissolved materials.

Company:

List Name & Address of All Disposal Facilities the Respondent Used During 200

Location	Total Tons Disposed of at the Facility
1. On-site	1,000
2. Off-site	2,000
3. Other	1,000
4. Total	4,000

Item	Quantity	Unit Price	Total Amount of Disposal Fee Paid to the Facility
1. Solid Waste	1000	1.00	1000.00
2. Hazardous Waste	0	0.00	0.00
3. Air Pollution	0	0.00	0.00
4. Water Pollution	0	0.00	0.00
5. Noise Pollution	0	0.00	0.00
6. Other	0	0.00	0.00
Total	1000	1.00	1000.00

[illegible]

TONS OF SOLID WASTE REVENUE RECEIVED BY COUNTY.	
County	2011 Solid Waste Revenue Tonnage
Atlantic	
Bergen	
Burlington	
Camden	
Cape May	
Cumberland	
Essex	
Gloucester	
Hudson	
Hunterdon	
Mercer	
Middlesex	
Monmouth	
Morris	
Ocean	
Passaic	
Salem	
Somerset	
Sussex	
Union	
Warren	
Out of State Waste Received	
Total Tons	
Year Ending December 31, 2011	

Expenses

1. List all contracts in place between the Respondent and a contractor for operation of a disposal facility owned by the Respondent. Provide the name of the contractor, length of the contract, the date of expiration and the amount spent on this contract in calendar year 2011:
2. List all contracts in place between the Respondent and a contractor for disposal of solid waste at a disposal facility NOT owned by the Respondent. Provide the name of the contractor, length of the contract, the date of expiration and the amount spent on this contract in calendar year 2011:
3. Identify all outstanding long-term debt the Respondent has incurred to finance Respondent's solid waste system. For each bond or encumbrance issued to finance your solid waste system, please state the following:
 - a. Date issued.
 - b. Original amount of debt.
 - c. Principle remaining.
 - d. Maturity date.
 - e. Annual debt service owed and paid.
 - f. Plan for paying off the total solid waste debt owed.
4. List all transportation contracts the Respondent has entered into. Provide the name of the contractor, term of the contract, when the contract terminates, item transported (ash or solid waste) and the amount spent in calendar year 2011 on this contract:
5. List all landfill air space contracts that the Respondent holds. Provide the name of the landfill, the length of the contract, the date the contract terminates, total space reserved (if applicable) and the amount spent on this contract in calendar year 2011:
6. Identify expenses for 2011 in the following categories:

7.

Administration	
Energy	
Insurance	
Professional Services	
Maintenance	
Special funds (landfill closure escrow, rate stabilization)	

Miscellaneous (for items less than 5% of total)	
Miscellaneous (items over 5% of total)	
Capital Improvements	
Acquisition of Capital Assets	

8. Identify any significant changes in your expenses that you expect to incur in 2012 (+/- 20% of 2011 expenses). Explain the anticipated changes.

Revenue

9. Report the annual revenue for 2011 from the following categories:

Gross operating revenue from each waste type and rate:

Each Rate for Type 10, waste

Each Rate for Type 13 waste

Each Rate for Type 23 waste

Each Rate for Type 25 waste

Each Rate for Type 27 waste

All other special wastes – tipping fees (tires, mattresses)

Recycling Revenue

Energy Revenue

Investment Revenue

Misc. Revenue Source

Total Gross Operating Revenue Calendar Year 2011

\$ _____

Major Contracts for Delivery of Solid Waste

List all major contracts the Respondent has in place for delivery of solid waste to the Respondent's (designated) facility, name of the company or entity to deliver the solid waste, length of the contract, date the contract terminates, total tons of solid waste delivered and total amount of revenue received during calendar year 2011 for each contract

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____

: Company

THIS SECTION MUST BE ANSWERED BY CORPORATIONS

[illegible]

THIS SECTION MUST BE ANSWERED BY LIMITED LIABILITY COMPANIES, PARTNERSHIPS OR PROPRIETORSHIP LIST NAMES OF MEMBERS, PARTNERS AND/OR OWNERS, RESIDENTIAL ADDRESS, AND % OF OWNERSHIP

[illegible]

NAME OF UTILITY _____

YEAR _____

SUMMARY OF SALARIES AND WAGES

- | COMPARISON OF SALARIES AND WAGES | |
|--|--|
| 1. Show in column (b) the number of officers and employees normally assigned to the functions shown in column (a). If an employee fills more than one function, list that employee in the one classification to which the majority of that employee's time is distributed. | |
| 2. Show in column (c) the total payroll distribution to each classification. | |
| 3. Column (b) and (c) should be considered independently because it is possible, due to multiple distribution of an employee's time, for a dollar amount to be charged to a classification to which employees are permanently assigned. | |

LINE NO.	CLASSIFICATION	AVERAGE NO. OF EMPLOYEES	PAYROLL DISTRIBUTION	PAYROLL DISTRIBUTION COMPARISON WITH PRECEDING YEAR INCREASE OR (DECREASE)
	(a)	(b)	(c)	(d)
1	Operation and Maintenance			
2				
3				
4				
5				
6				
7	Administration and Supervision			
8				
9				
10				
11	Other Accounts			
12				
13				
14				
15				
16	Total Payroll for Year			

SALARIES

- SALARIES**
1. Report amount paid during year to all officers and all supervisory employees.
 2. If any listing is for less than full year, state period covered.
1. Bonuses and other remuneration should be included. Furnish particulars.

[illegible]

Notes:

1. List security holders having more than 5% voting powers in Respondent, security holders that are corporate directors, security holders that would have more than 5% voting powers if their securities were converted or if their warrants were exercised. 2. Arrange names of security holders in order of voting power commencing with the highest. 3. Indicate officers and directors with an asterisk. 4. Report the particulars called for concerning each issue and series of common stock, preferred stock, convertible bond and warrant. 5. Amount shown in column (g) with respect to non-par stock without value should be the cash value per share of the consideration received. 6. Indicate the method used to calculate the conversion value of convertible bonds and warrants.

[illegible]

Solid Waste Number: SW _____ : Company _____

ANNUAL REPORT – SOLID WASTE DISPOSAL UTILITIES
Year Ending December 31, 2011

*\$ _____

OPERATING EXPENSES:

Disposal (Transfer

Station or incinerator ash) _____

Salaries & Benefits _____

Fuel & Oil _____

OFFICE EXPENSES:

Salaries & Benefits _____

General & Admin _____

MAINTENANCE EXPENSE:

Salaries & Benefits _____

Equipment _____

Building & Grounds _____

DEBT EXPENSE:

DEPRECIATION EXPENSE:

TAXES:

Payroll _____

Other (Specify) _____

GROSS INCOME (LOSS):

Income Tax _____

NET INCOME (LOSS):

ENVIRONMENTAL PROTECTION
ENVIRONMENTAL MANAGEMENT
ECONOMIC REGULATION & LICENSING
TELEPHONE (609) 984-6746
FAX (609) 777-1951

GROSS OPERATING REVENUE STATEMENT FOR SOLID WASTE DISPOSAL
FOR YEAR ENDED DECEMBER 31, 2011

Solid Waste Number: SW _____ Company _____

Street Address _____

Billing Address _____

Telephone Number: _____ Fax Number: _____

GROSS OPERATING REVENUES DERIVED FROM NEW JERSEY SOLID WASTE DISPOSAL
DURING 2011.

*\$ _____

Verification

STATE OF NEW JERSEY)
COUNTY OF) SS (To be made by the officer or person)
(in charge of the accounts, records)
(and memorandum of the reporting)
(utility)

_____ being duly sworn on his/her oath states that he/she is the

_____ of his/her duty to have charge of the accounts, records and memoranda of the said utility; that under his/her direction the foregoing statement has been compiled from the said accounts, records and memoranda; that he/she has carefully examined the foregoing statement, that it is in accord with the said accounts, records and memoranda; and that the allegations of fact made in the said statement are true to the best of his/her knowledge and belief.

Subscribed and sworn to before me on
This _____ day of _____

Signature of Affiant

Signature and title of officer
Authorized to administer oath

File this statement with the DEPARTMENT OF ENVIRONMENTAL PROTECTION,
ENVIRONMENTAL MANAGEMENT, ECONOMIC REGULATION & LICENSING,
Mail Code 401-02C, 401 EAST STATE ST, TRENTON, NJ 08625

Solid Waste Number: SW _____ : Company: _____

Verification

The following report must be verified by the oath of the person responsible for the preparation of the report. It should be verified, also, by the oath of the President or another principal general office of the respondent, in the case of a corporation, or the proprietor in the case of an individual, or a partner in case of a partnership.

Oath

State of _____

(To be made by the person responsible of report)

County of _____

_____ makes oath and says that he/she is _____
(Insert name of Affiant) (Insert title of Affiant)

That it is their duty to have supervision over the books of account of the respondent and to control the manner in which such books are kept; that he/she knows that such books have, during the period covered by the foregoing report, been kept in good faith in accordance with the accounting and other orders of the New Jersey Department of Environmental Protection, effective during the period; that he/she has carefully examined the said report and to the best of their knowledge and belief the entries contained in the said report have, so far as they relate to matters of account, been accurately taken from the said books of account and are in exact accordance therewith; that he/she believes that all other statements of fact contained in the said report are true, and that the said report is a correct and complete statement of the business and affairs of the above named respondent during the period of time from and

including _____ and to and including _____

(Signature of Affiant)

Subscribed and Sworn to before me, a _____, in and for the State and County above named, this _____ day of _____.

My commission expires _____ [Use an L.S. Impression Seal]
(Signature of officer authorized to administer oath)

Supplemental Oath

(By the Proprietor, Partner, President or other principal general officer of the respondent)

STATE OF _____

COUNTY OF _____

_____ makes oath and says that he./she is _____
(Insert name of Affiant) (Insert title of Affiant)

That he/she has carefully examined the foregoing report; that he/she believes that all statements of fact contained in the said report are true, and that the said report is a correct and complete statement of the business and affairs of the above named respondent and the operations of its property during the period of time from and including _____

to and including _____

Subscribed and Sworn to before me, a _____, in and for the State and County above named, this _____ day of _____.

My commission expires _____ Use an L.S. Impression Seal
(Signature of officer authorized to administer oath)